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Dear Sir or Madam,

I am writing to hereby testify that in my opinion long acting injectable Ability ought to be added to the state Medicaid formulary. We have relatively few options available for long acting medications in the treatment of chronic psychotic disorders, and of those many have side effects such as sedation, weight gain, movement disorder, or parkinsonism that preclude their usage in many patients. Many patients outright refuse to take any medication for these reasons. Ability has a unique niche for these patients, and with the exception of akathisia in about 15% of people is side effect free. One interesting clinical observation I have had is that in contrast to all other agents, abilify has a mood elevating effect in addition to its antipsychotic affect, which makes it a first line treatment for me. For many people and especially young women who are very image conscious, they refuse to take many medications because of weight gain, and here again abilify is especially useful. Prior to making this recommendation, I reviewed the literature of clinical trials and also conferred with the author of one of these trials who was also a teacher of mine at Duke during my residency, and he also believes there is a role for long acting abilify in his current practice. He uses it along with two older generation long acting antipsychotics as his drugs of choice for the patient population we see at state hospital north. I have not and never will benefit financially from my relationship with Otsuka while in my role as medical director of state hospital north. Otsuka is one of the only pharmaceutical companies left with active drug development for patients with chronic psychotic disorders. Most other companies have pulled out of Rand D and now patent enantiomers or sustained release versions of current drugs. I will continue to use generics wherever possible in my practice, but in many occasions the cost for these medications approaches that of abilify, and Otsuka is very helpful and generous with patient assistance programs. They have been the best of any company in helping our state hospital afford these medications, providing them to us free of cost. While this is an expensive medication, all told it should be considered along with Haldol and prolixin a first line agent. It also has a better side effect profile than either of these medications. And finally, when cost is incurred, I rest easy knowing that a good proportion of the proceeds are being put back into research and development for the disadvantaged populations we serve, who remain in desperate need of improved options for medical management of their symptoms.

Best Wishes and Thank You,

Thadeus B Koontz M.D., Ph.D.

Medical Director State Hospital North